Allowances for Tenant-Furnished Utilities and Other Services

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB Approval No. 2577-0169 (exp. 07/31/2007)

See Public Report	ting Statement and Ins	tructions on back		11-4 T			D-t- (/- -
Locality	CLAIBORNE	COUNTY Unit Type MOBILE HOME				Date (mm/dd/yyyy) 10/1/2006	
Utility or Service		Monthly Dollar Allowances 0 BR 1 BR 2 BR 3 BR 4 BR 5 BR					
Heating	a. Natural Gas	29	38	49	60	71	84
	b. Bottle Gas	23	43	62	68	84	102
	c. Oil / Electric	16	30	44	46	58	70
	d. Coal / Other	0	0	0	0	0	0
Cooking	a. Natural Gas	4	4	4	6	7	10
	b. Bottle Gas	4	6	6	7	10	12
	c. Oil / Electric	2	3	5	5	7	8
	d. Coal / Other	0	0	0	0	0	0
Other Electric		9	14	20	20	20	20
Air Conditioning		7	10	14	14	15	16
Water Heating	a. Natural Gas	7	10	12	16	18	22
	b. Bottle Gas	12	16	17	22	29	33
	c. Oil / Electric	8	13	18	21	22	24
	d. Coal / Other	0	0	0	0	0	0
Water		13	18	21	23	33	41
Sewer		10	11	13	15	21	25
Trash Collection		6	6	6	6	6	6
Range/Microwave		2	2	2	2	2	2
Refrigerator		2	2	2	2	2	2
Other specify		0	0	0	0	0	0
Actual Family Allowances To be used by the family to compute allowance. Complete below for the actual unit rented.					Utility of Heating Cooking		per month cost
Name of Family					Other E	lectric ditioning	
Address of Unit					Water Sewer Trash C Range/I	Water	
Number of Bedrooms Other Total						alUI	· ·
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